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**FAX TRANSMISSION****DATE:** July 20, 2006**PTO IDENTIFIER:** Application Number 10/628,999-Conf. #7333  
Patent Number**Inventor:** Rudolf E. Falk et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** EDWARDS ANGELL PALMER & DODGE LLP

Gregory B. Butler, Ph.D., Esq.

**PHONE:** (617) 439-4444**Attorney Dkt. #:** 63414CON2(49917)**PAGES (Including Cover Sheet):** 16**CONTENTS:** Amendment Transmittal (1 page)  
Amendment (13 pages)  
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**EDWARDS ANGELL PALMER & DODGE LLP**  
P.O. Box 55874, Boston, Massachusetts 02205  
**Telephone:** (617) 439-4444 **Facsimile:** (617) 439-4170

PTO/SB/97 (09-04)

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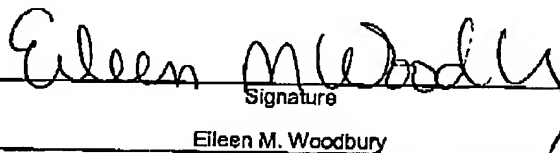
Application No. (if known): 10/628,999

Attorney Docket No.: 63414CON2(49917)

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Amendment Transmittal (1 page)

Amendment (13 pages)

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<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 63414CON2(49917)	
Application No. 10/628,999-Conf. #7333		Filing Date July 28, 2003		Examiner L. C. Maler	
Applicant(s): Rudolf E. Falk et al.					
Invention: TREATMENT OF CONITIONS AND DISEASE					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>		- 20 =		x	
<b>Independent Claims</b>		- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Gregory B. Butler, Ph.D., Esq. Attorney/Agent Reg. No.: 34,558				Dated: <u>July 20, 2006</u>	
EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (617) 439-4444					

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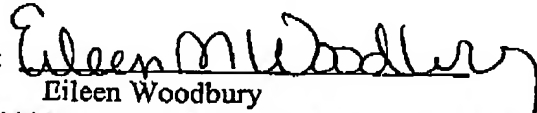
**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****APPLICANTS:** Falk, R.E., et al.**U.S.S.N.:** 10/628,999**GROUP ART UNIT:** 1623**FILED:** July 28, 2003**EXAMINER:** Maier, L. C.**FOR:** "USE OF HALURONIC ACID OR ITS DERIVATIVES TO  
ENHANCE DELIVERY OF ANTINEOPLASTIC AGENTS"

\*\*\*\*\*

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By:

  
Eileen Woodbury

\*\*\*\*\*

**MAIL STOP AMENDMENT**

Commissioner for Patents

P.O. Box 1450

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**AMENDMENT**

Sir:

Applicants are in receipt of the Office Action dated May 26, 2006 and request reconsideration of the above-identified application in view of the following arguments and remarks.

Remarks/Arguments begin on page 4 of this paper.